



Dear Emergency Ambulance Provider:

Effective July 1, 2003, Emergency Ambulance Services rates will be reduced by 10%.

Please continue to use the nine-digit provider number you were issued and have always used for billing Georgia Medicaid. On the CMS-1500, this information is located in item 33. Please do not add any zeros to your provider number. Your provider number must be on all claims submitted. Failure to include your provider number will cause significant problems/delays in processing your claims.

For questions regarding this message, you may contact Hazel Dorsey, Program Specialist, at (404) 651-6911. Thank you for your continued support and participation in the Georgia Medicaid Program.